Please type a plus sign (+) inside this box

PTO/SB/01 (12-97)

Approved for use through 8/30/00, OMB 0631-0032
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)

OR

Declaration Submitted With Initial Filing

⊠Declaration Submitted after Initial Filing (surcharge (37 ČFR 1.16 (e)) required)

Attorney Docket Number First Named Inventor		3579.1			
		Gregory C. Loney			
CC	MPL	ETE IF KNOWN			
Application Number	10/769,575				
Filing Date	1/29)/2004			
Group Art Unit	164	1			
Examiner Name	TBE				

As a below named inventor, I hereby declare that:								
My residence, post office address, and citizenship are as stated below next to my name.								
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention emitted.								
SYSTEM AND METHOD FOR CALIBRATION AND FOCUSING A SCANNER INSTRUMENT USING ELEMENTS ASSOCIATED WITH A BIOLOGICAL PROBE ARRAY								
the specification of which	(Title of the	e Invention)		•				
is attached hereto								
OR								
was filed on (MM/DD/Y)	was filled on (MM/DD/YYYY) 1/29/2004 as United States Application Number or PCT International							
Application Number 10/769,575 and was amended on (MM/DD/YYYY) (if applicable).								
I hereby state that I have raviews	ed and understand the conter	nts of the above identified \$	pecification, including	g the claims as ar	nended			
specifically referred to above.								
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56								
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, tisted below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.								
Prior Foreign Application		Foreign Filing Date	e Priority Certif		d Copy Attached?			
Number(s)	Country	(MM/DD/YYYY) Country	Not Claimed	YES	NO			
			a					
]								
			ם					
☐ Additional foreign application	numbers are listed on a sup	plemental priority data shee	t PTO/\$B/02B attac	had hereto:				
I hereby daim the benefit under:								
ApplicationNumber(s)		MM/DD/YYYY)	·					
60/443,402	1/29/2003	Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.						

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.4 hours of complete. Time will vary depending upon the needs of the Individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT \$END FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

From-781-687-9090 se type a plus sign (+) inside this box

PTO/SB/01 (12-97)
Approved for use through 0/30/00 OMB 0651-0032
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Pages are required to respond to a collection of information unless it contains a valid OMB control number.

- Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 355© of any PCT international application designating the United States of America, listed below and, insolar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as cellned in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.									
U.S. Parent Application or PCT Parent Number			Parent Filing Date (MM/DD/YYYY)				Parent Patent Number (if applicable)		
Additional U.S. or PC	T international ap	plication num	ers are list	ted on a su	pplement	al priori	ty data sheet F	TO/\$6/02B at	tached hereto.
As a named inventor, I hereby appoint the Patent and Trademark Office connected therewith		☐ Customer Number			22886			Place Customer Number Bar Code Label here	
••		Reg	Registered practitioner(s) name Registration Number		ne/registration number listed below Name			Registration Number	
Name	<u> </u>		under	DEF NAME NAME					
☐Additional registered	practitioner(s) na	med on suppl	emental Rê	gistered Pro	actitioner	Inlorma	tion sheet PTO	O/SB/02C atta	ched hereto.
Direct all correspondence to: ☐ Customer Number or Bar Code Label 22886 ☐ Correspondance address to					noe address below				
Name									
Address									
Address	·					γ			
City					State	1		IP	
Country		Telepho		Fax					
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.									
Name of Sole or F	Name of Sole or First Inventor:					ed inventor			
Given Na	Given Name (first and middle [if any]) Family Name or Sumame								
	Gregory C. Loney								
Inventor's Signature	£1~	7-/2-04							
Residence: City	Concord			Citizenshi	USA				
Post Office Addres	\$ 127 Tarb	ell Spring F	Road						
Post Office Addres					,				
City	Conco	State	MA	ZIP	ZIP 01742 Cou		Country	USA	
Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.									